Accepted Manuscript

Measurement and Associations of the Optic Nerve Subarachnoid Space in Normal Tension and Primary Open Angle Glaucoma

Hanruo Liu, MD, Diya Yang, MD, Teng Ma, MD, Wenyuan Shi, MD, Zhu Qiang, MD, Jun Kang, MD, Ningli Wang, MD

AMERICAN JOURNAL OF OPHTHALMOLOGY

PII: S0002-9394(17)30520-2

Reference: AJOPHT 10345

DOI:

To appear in: American Journal of Ophthalmology

10.1016/j.ajo.2017.11.024

Received Date: 24 August 2017

Revised Date: 29 November 2017 Accepted Date: 30 November 2017

Please cite this article as: Liu H, Yang D, Ma T, Shi W, Qiang Z, Kang J, Wang N, Measurement and Associations of the Optic Nerve Subarachnoid Space in Normal Tension and Primary Open Angle Glaucoma, *American Journal of Ophthalmology* (2018), doi: 10.1016/j.ajo.2017.11.024.

This is a PDF file of an unedited manuscript that has been accepted for publication. As a service to our customers we are providing this early version of the manuscript. The manuscript will undergo copyediting, typesetting, and review of the resulting proof before it is published in its final form. Please note that during the production process errors may be discovered which could affect the content, and all legal disclaimers that apply to the journal pertain.

ACCEPTED MANUSCRIPT

Abstract

Purpose: To measure the area of the optic nerve subarachnoid space (ONSASA) in patients with normal tension (NTG), primary open angle glaucoma (POAG) and controls and examine its association with relevant ocular and systemic parameters.

Design: Cross-sectional study.

Methods: The study included 40 patients with NTG, 42 with POAG and 45 healthy controls. B-scan ultrasound was performed binocularly, using a 12.5 MHz linear array probe. The measurement of the optic nerve subarachnoid space (ONSAS) and calculation of the ONSASA were used ImageJ1.51e analysis software by two experienced observers in a masked manner.

Results: The ONSASA between 3 to 7mm behind the globe in NTG $(5.15\pm0.81\text{mm}^2)$ was significantly smaller than that in the POAG $(6.24\pm1.62\text{mm}^2, p=0.0008 \text{ or control})$ $(6.40\pm2.20\text{mm}^2; p=0.0007)$ groups. ONSASA in the POAG and control groups were not significantly different (p=0.13). ONSASA was significantly associated with mean IOP (p=0.0004) and highest IOP (p=0.0007). The ONSD in NTG compared to POAG was significantly different at 3mm $(4.46\pm0.43\text{mm versus} 4.79\pm0.40\text{mm}, p=0.0007)$, 5mm $(4.40\pm0.39\text{mm versus} 4.65\pm0.47\text{mm}, p=0.003)$ and 7mm $(4.36\pm0.35\text{mm} \text{ versus} 4.61\pm0.30\text{mm}, p=0.004)$ behind the globe.

Conclusions: The ONSASA is smaller in NTG as compared to normal control. This is compatible with a lower cerebrospinal fluid pressure in the optic nerve in NTG, implying that trans-lamina cribrosa pressure difference might be abnormally higher in NTG group than in normal control.

Download English Version:

https://daneshyari.com/en/article/8790722

Download Persian Version:

https://daneshyari.com/article/8790722

<u>Daneshyari.com</u>